MANNA
Improving health. Delivering nourishment.

Securities Gift Form

Name(s) _____

Phone _____

Address _____

City _____ **State** _____ **Zip** _____

I/ We are pleased to support MANNA with a commitment of:

# of shares	**Security Name**	**Ticker Symbol or CUSIP#**

Expected Transfer Date _____ City _____

Brokerage/Bank Name _____ Phone _____

Broker Name _____

Deliver securities to:
TD AMERITRADE Clearing, Inc #0188
For further credit to:
Metropolitan Area Neighborhood Nutrition Alliance 756375854

Signature _____ Date _____

Spouse / Partner Signature (when joint gift) _____ Date _____

Return form to: MANNA, Richard Curtis, 420 N. 20th Street, Philadelphia, PA 19130 or via fax: 215-496-1349
Questions: 215-496-2662 ext. 148 rcurtis@mannapa.org

All contributions are tax-deductible within limits prescribed by law. The official registration and financial information of MANNA may be obtained from the Pennsylvania Department of State by calling toll free, within Pennsylvania, (800) 732-0999. Registration does not imply endorsement